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| Minnesota Pollution Control Agency (MPCA), 520 Lafayette Road North, St. Paul, MN 55155-4194 | Permit application for issuance, reissuance, or major modification  Solid Waste Permit Program  *Doc Type: Permit Application* |

|  |  |
| --- | --- |
| **MPCA Use Only** | |
| AI number: |  |
| Activity ID: |  |

## **Print or type application:** Before submitting, make a photocopy for your records. The Minnesota Pollution Control Agency (MPCA) will review the application for completeness and provide an official response to the permittees within 30 business days of receipt of the application.

**Permit application assembly:** To expedite the processing and review of your application, **put this form at the beginning** of your submittal package. Please place all checklists directly behind this application form in order by the number found on the bottom left hand corner of each checklist. **Do not place forms and checklist in an appendix** as this makes it difficult and time consuming for staff to locate them.

## **Completeness instructions:** Without properly completed forms, an application cannot be processed and will be determined to be incomplete. All sections of this form must be completed. If portions do not apply to this facility, please indicate so with “n/a”.

|  |  |
| --- | --- |
| **The completed form is to be returned to:** | **Solid Waste Permit Document Coordinator**  Minnesota Pollution Control Agency  520 Lafayette Road North  St. Paul, MN 55155-4194 |

## **Submittal:** You must submit one (1) paper copy ***and*** one (1) electronic copy (i.e., disc or thumb drive) of your application.

**Application is for** (check appropriately):  New permit  Permit reissuance  Major modification

|  |  |
| --- | --- |
| Resubmittal of ‘Incomplete’ application originally submitted on: |  |
| ***Note:*** *Different forms are available for Minor Modifications or Change in Ownership/Operation. (Found on the MPCA’s Solid Waste Permitting website at* [*https://www.pca.state.mn.us/waste/solid-waste-permitting*](https://www.pca.state.mn.us/waste/solid-waste-permitting)*.)* | *(mm/dd/yyyy)* |

## Facility name and address

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Facility name: | | |  | | | | | | | | | | | |
| Address: | |  | | | | | | | | | | | | |
| City: |  | | | | | | | State: | | |  | | Zip: |  |
| MPCA Region (check one): | | | | Brainerd  Detroit Lakes  Duluth  Marshall  Metro  Rochester | | | | | | | | | | |
| Applications for metro facilities must include information to demonstrate the proposed facility is in accordance with the metropolitan policy plan (Minn. Stat. 473.823). | | | | | | | | | | | | | | |
| Is there an existing solid waste permit for the facility?  Yes No | | | | | | | | | | | | | | |
| If yes, what is the permit number: | | | | | PBR | |  | | | **or**  SW | |  | | |
| Permit expiration date (mm/dd/yyyy): | | | | | |  | | |  | | | | | |

# Checklists required (Please check all that are included with this application.)

All applicable checklists must be completed and submitted with this application. The MPCA will not process an application that does not include all of the required checklists. All checklists can be found on the MPCA’s website at <https://www.pca.state.mn.us/waste/solid-waste-permitting>.

All solid waste facilities

# [Solid Waste Facility Application Checklist](https://www.pca.state.mn.us/sites/default/files/w-sw7-32.doc) [Metro permit review application checklist (w-sw7-44)](https://www.pca.state.mn.us/sites/default/files/w-sw7-44.docx)

*(Required for metro facilities only)*

Activity specific checklist

|  |  |
| --- | --- |
| [MSW Landfill Application Checklist](https://www.pca.state.mn.us/sites/default/files/w-sw7-37.doc) [MSW Combustor Ash Landfill Application Checklist](https://www.pca.state.mn.us/sites/default/files/w-sw7-38.doc) [Demolition Debris Landfill Application Checklist](https://www.pca.state.mn.us/sites/default/files/w-sw7-35.doc) [Industrial Solid Waste Landfill Application Checklist](https://www.pca.state.mn.us/sites/default/files/w-sw7-36.doc) [Solid Waste Transfer Station Application Checklist](https://www.pca.state.mn.us/sites/default/files/w-sw7-33.doc) [Solid Waste Compost Facility Application Checklist](https://www.pca.state.mn.us/sites/default/files/w-sw7-39.doc) | [SSOM Compost Facility Application Checklist](https://www.pca.state.mn.us/sites/default/files/w-sw3-54.doc) [Checklist for a Site Suitability Workplan for a Source-Separated Compost Facility](https://www.pca.state.mn.us/sites/default/files/w-sw3-52.doc) [Refuse-Derived Fuel Processing Facilities Application Checklist](https://www.pca.state.mn.us/sites/default/files/w-sw7-34.doc) |

## Facility information

## **A. Legal description of property** (acreage includes the entire area of the facility)

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | Acres | |  | ¼ |  | | ¼ |  | | ¼ |  | ¼ | | Section | |  |  | | T |  | N |  | R |  | W |
| Township name: | | |  | | | | | | | | | | | MN Legislative District: | | | |  | | | | | | | |
| County: | |  | | | | | | | | | | | |  | | | | | | | | | | | |
| Latitude: | |  | | | | Deg | | |  | | Min | |  | | Sec North | | | | | | | | | | |
| Longitude: | |  | | | | Deg | | |  | | Min | |  | | Sec West | | | | | | | | | | |

## **B. General information**

|  |  |  |
| --- | --- | --- |
| 1. | Directions to the facility (physical location) [Minn. R. 7001.3300, item A]: | |
|  |  | |
| 2. | Current land use [Minn. R. 7001.3300, item N]: | |
|  |  | |
| 3. | Current zoning designation of the site and the surrounding areas within a quarter mile radius [Minn. R. 7001.3300, item N]: | |
|  |  | |
| 4. | Describe the key topographic features at and around the facility [Minn. R. 7001.0050, item F]: | |
|  |  | |
| 5. | a) Has either an Environmental Assessment Worksheet (EAW) or Environmental Impact  Statement (EIS) been completed in the past? [Minn. R. 7001.0050, item G] | Yes  No |
|  | If yes, please provide date of completion: |  |
|  | b) Does this application require a new Environmental Assessment Worksheet (EAW)  [Minn. R. 4410.4300] or Environmental Impact Statement (EIS) [Minn. R. 4410.4400]? | Yes  No |
|  | Explain: |  |
| 6. | a) Have variances been approved in the past for this facility? | Yes  No |
|  | If yes, please list and provide approval dates and documentation: |  |
|  | b) Are there new variances requested in this application in accordance with Minn. R. 7000.7000? | Yes  No |
|  | If yes, list/explain (this should include the applicable rule citation for the requested variance(s)): |  |
| 7. | Is this facility in an environmental justice area? Please use the link below to identify<http://mpca.maps.arcgis.com/apps/MapSeries/index.html?appid=f5bf57c8dac24404b7f8ef1717f57d00> | Yes  No |
|  | If yes, which areas apply?  At least 40% of people reported income less than 185% of the federal poverty level  50% or more people of color  Federally recognized tribal areas | |
| 8. | a) Has Certificate of Need (CON) been granted in the past for this facility? | Yes  No |
|  | If yes, please list and provide approval dates and amounts issued: |  |
|  | b) Is additional CON requested in this application in accordance with Minn. Stat. 115A.917 Metropolitan Policy Plan? | Yes  No |

## **C. Identify the following features within a one mile radius of the site**

|  |  |  |  |
| --- | --- | --- | --- |
| **Feature** | **Name of feature** | **Distance** | **Units** |
| Current and former water supply or monitoring wells |  |  |  |
| Airports (Minn. R. 7035.2815, subp 2(C)) |  |  |  |
| Lakes or ponds (Minn. R. 7035.2555, subp 2(A)) |  |  |  |
| Rivers, streams or springs (Minn. R. 7035.2555, subp 2(A)) |  |  |  |
| Wetlands (Minn. R. 7035.2555, subp 2(B)) |  |  |  |
| Floodplains (Minn. R. 7035.2555, subp 1) |  |  |  |
| Karst features (sinkholes, caves) (Minn. R. 7035.2815, subp 2(1); Minn. R. 7035.2825, subp 2(A)) |  |  |  |
| Parks or wildlife refuges |  |  |  |
| Present or proposed access and major haul roads, and their weight restrictions |  |  |  |
| Easements or right-of-way |  |  |  |
| Recreational areas |  |  |  |
| Historical or archeological areas |  |  |  |

## II. Waste activity information

1. **Waste Activities that occur at the facility** (complete a row for each waste activity area and each waste type)

| **Waste activity**  (Select from dropdown list) | **Waste type managed**  (Select from dropdown list) | **Current permitted capacity** | | | | **Proposed capacity change** | | | | **Design capacity** | | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Area** | **Units** | **Capacity** | **Units** | **Area** | **Units** | **Capacity** | **Units** | **Area** | **Units** | **Capacity** | **Units** |
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1. **Land disposal** (complete a row for each separate waste disposal area, closed and active areas)

| **Disposal type** (Select from dropdown list) | **Designation/ area name** | **Status** (Select from dropdown list) | **Occupied footprint (acres)** | **In-place volume (cy)** | **Area at final elevation with no final cover (acres)** | **Area at final elevation with final cover (acres)** | **Certificate of  need available (MSW only)** |
| --- | --- | --- | --- | --- | --- | --- | --- |
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## III. Operational information

## **A. The facility will have capacity to receive** **vehicles per day and expects to receive an average of       vehicles per day.** List the vehicle types (i.e., packer trucks, roll-off boxes, private citizen vehicles) using the facility including those that transport special wastes, such as tires or white goods.

|  |  |  |
| --- | --- | --- |
| **Vehicle type** | **Vehicle capacity** | **Waste type transported** |
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## **B. Describe the equipment to be located and used on site at the facility, or the availability and arrangement for use of equipment kept off-site, managing the waste:**

|  |
| --- |
|  |

## IV. Solid waste annual report contact

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Print name: |  | | Title: |  | | | |
| Email: |  | | Phone: |  | | | |
| Organization: |  | | | | | | |
| Address: |  | | | | | | |
| City: |  | State: | | |  | Zip: |  |

## V. Signature and certification

1. Engineer (Consultant)

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Print name: |  | | | License number: | | |  | | |
| Title: |  | | | State licensed: | | |  | | |
| Email: |  | | | Phone: | | |  | | |
| Organization: |  | | | | | | | | |
| Address: |  | | | | | | | | |
| City: |  | | State: | |  | | | Zip: |  |
| Signature: |  | Date (mm/dd/yyyy): | | | |  | | | |

1. **Permittees**

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete.

I further certify that the construction and operation of the above described facility will be in accordance with the plans, specifications, reports and related communications accepted by the MPCA and on file in its office; and in accordance with conditions imposed in the permit issued by the MPCA.

I certify that the facility is consistent with local solid waste management plans. I am aware an MPCA permit must be obtained before construction or operation of the facility may begin and all local permits, licenses or other government approval must be obtained before an MPCA permit can be issued.

I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment.

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Landowner** | | | | | | | | | | |
| Print name: |  | Title: | |  | | | | | | |
| Email: |  | Phone: | |  | | | | | | |
| Organization: |  | | | | | | | | | |
| Address: |  | | | | | | | | | |
| City: |  | | State: |  | | | | | Zip: |  |
| Signature: |  | | | Date (mm/dd/yyyy): | | |  | | | |
| **Activity owner (Applicant)** | | | | | | | | | | |
| Print name: |  | Title: | |  | | | | | | |
| Email: |  | Phone: | |  | | | | | | |
| Organization: |  | | | | | | | | | |
| Address: |  | | | | | | | | | |
| City: |  | | State: |  | | | | | Zip: |  |
| Signature: |  | | | Date (mm/dd/yyyy): | | |  | | | |
| **Operator\*** | | | | | | | | | | |
| Print name: |  | | | Certification No: | |  | | | | |
| Title: |  | | | Expiration date: | |  | | | | |
| Email: |  | | | Phone: |  | | | | | |
| Organization: |  | | | | | | | | | |
| Address: |  | | | | | | | | | |
| City: |  | | State: |  | | | | | Zip: |  |
| Signature: |  | | | Date (mm/dd/yyyy): | | | |  | | |

## *\*Provide the same information for other certified operators.*

## **VI.** Local acknowledgment

This section is primarily meant to notify the county and local authorities of the applicant’s intent so that all county and local ordinances and plans can be met. It is intended to validate that counties and local authorities were properly notified of this permit application for construction and operation. Signature by the county or local authority is not meant to imply approval.

**A. County acknowledgment/permission** (to be completed by County Solid Waste Administrator or County Zoning Administrator)

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Print name: |  | Title: | |  | | |
| Email: |  | Phone: | |  | | |
| Organization: |  | | | | | |
| Address: |  | | | | | |
| City: |  | | State: | MN | Zip: |  |

**B. Local acknowledgment/permission** (to be completed by local building or zoning office)

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Print name: |  | Title: | |  | | |
| Email: |  | Phone: | |  | | |
| Organization: |  | | | | | |
| Address: |  | | | | | |
| City: |  | | State: | MN | Zip: |  |

In lieu of completion of this part of the application, the applicant may submit documentation that the applicant has sent appropriate notification to the county and local authorities. Documentation must consist of copies of letters sent to the county and local authorities via certified mail, return receipt requested and copies of the signed return receipt.

1. **Local approvals**

**Have all local licenses/approvals been acquired?**  Yes  No

**If yes,** please list all approvals, include issuances and expiration dates (include a copy of each approval)

|  |
| --- |
|  |

**If no,** please explain:

|  |
| --- |
|  |

1. **Solid waste transfer facilities and source-separated organic material (SSOM) compost facilities**

The applicant for a transfer facility or SSOM compost facility must attach copies of all required municipal licenses/approvals, unless the applicant is a municipality. The MPCA will not process an application without these approvals. See Minn. R. 7001.3400, item C, or 7001.3375 item L for more details. If no municipal approvals are required the owner or operator must sign the statement below stating that no municipal approvals are required.

I certify, no municipal approvals are required:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Print name: |  | Title: |  | |
| Signature: |  | Date (mm/dd/yyyy): | |  |

1. **Land disposal facilities**

The MPCA may not issue a permit for a new disposal area or an expansion of an existing disposal area prior to local units of government granting approval. All local approval will need to be obtained prior to issuance of the MPCA solid waste permit for disposal activities. See Minn. Stat. § 116.07, subd. 4j, item d(1) for more details.